



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES**

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**Department for Medicaid Services (DMS) Case Management (CM) Advisory Subpanel
December 14, 2018, 1:15pm-3:15pm
Meeting Summary**

Meeting: Case Management Advisory Subpanel – Meeting #1

Date: December 14, 2018

Location: Frankfort Plant Board, Community Room, 151 Flynn Ave, Frankfort, KY 40601

AGENDA TOPICS AND KEY DISCUSSION POINTS

- I. Welcome and Introductions
 - DMS opened the meeting and discussed agenda and objectives
 - Introductions were completed
 - Subpanelists shared reasons they were interested in being subpanelists.
- II. Case Management Advisory Subpanel Overview
 - Reviewed the subpanel charter
 - Discussed the subpanelist roles and responsibilities and upcoming election of a chair to attend the over-arching panel
 - Reviewed the case management timeline which depicts the work and tasks ahead of us and their associated timeframes
 - Introduced focus areas to be covered in the upcoming months
 - Case management leading practices
 - Person centered service planning requirements
 - Service authorizations
 - Case manager training
 - Case management help desk
- III. Case Management Stakeholder Themes

- Navigant provided an overview of stakeholder feedback obtained during prior stakeholder engagement activities, demonstrating where the intent of planned improvements connects back to stakeholder input

Table 1: Stakeholder Themes and Planned Actions for Improvement

Stakeholder themes	Planned Actions for Improvement
<ul style="list-style-type: none"> • Balance medical, social, environmental and other needs • Build engagement between service authorization resource and providers • Integrate critical thinking into decision-making • Develop confidence to set limits 	Build guidance and tools for authorization of services
<ul style="list-style-type: none"> • Build subject matter and policy expertise • Provide an overall training approach that eliminates silos • Build 'skill' component (current focus is on technical aspects) • Create 'real life' examples and scenarios for training • Encourage broad understanding of available services 	Develop Case Manager training curriculum
<ul style="list-style-type: none"> • Incorporate participant's wants/needs into meaningful goals • Increase critical thinking in planning and monitoring • Standardize aspects of person-centered service planning (PCSP) to support continuity of service planning • Improve risk identification, mitigation, coordination of care and planning for transitions 	Establish minimum standards for person-centered service planning tools and templates, and operationalize cabinet review process
<ul style="list-style-type: none"> • Access resources for technical guidance • Support for critical incidents and other field concerns • Get answers to questions more efficiently • Standardize aspects of PCSP to reduce performance variation • Support for difficult decisions (conflict free, service needs vs. wants) 	Staff and operationalize a case management help desk

IV. Case Management Leading Practices

- Navigant presented case management leading practices which were developed through research, review of other state programs and Navigant experience. Leading practice review and discussion will lead to decisions about case management standards.
- Subpanelists engaged in an interactive exercise to:
 - Review each element and its corresponding leading practices

- Provide input on the current case management activities by indicating whether the leading practice:
 - Column A: Currently happens with quality and consistency
 - Column B: Currently happens but is inconsistent and additional training is needed
 - Column C: Does not occur or is a new practice

Table 2 : Elements and Leading Practice Discussion

Element	Associated Leading Practice	A	B	C
Initial Engagement	Guide respectful listening by practicing "person centered thinking"		12	
	Provide a participant handbook explaining the planning process		4	8
	Case managers have a guide to provide direction in facilitating initial engagement		4	8
Initial Engagement: key takeaways from discussion <ul style="list-style-type: none"> • Subpanelists agreed that information and steps to take can be confusing. A participant handbook and a case manager guide would be very useful for all stakeholders. • Subpanelists agreed that training was needed on all leading practices associated with initial engagement. • Concerns were raised with delays in receipt of level of care (LOC) documentation resulting in case managers rushing to complete activities and consequently not practicing person-centered thinking. • Concern was raised about some providers who tell case managers what goals to put in the plan. 				
Conflict Free Case Management	Verify that CM activities are independent from direct services	5	6	
	Implement safeguards to protect against conflict of interest	5	6	
	Reinforce exceptions through state oversight and approval	6	5	
Conflict Free Case Management: key takeaways from discussion <ul style="list-style-type: none"> • Subpanelists indicate that Kentucky has done a good job in putting the conflict free policy in place although training is still needed • Some subpanelists discussed the lack of communication between case managers and providers • There are some concerns that individuals may work as a case manager for one agency and as a direct service provider for another agency • Case management relationship may result in bias or undue influence on participant choice of providers even with the conflict free policy in place 				

Element	Associated Leading Practice	A	B	C
Options Counseling	Provide service options to meet goals by being familiar with source of care funding, waiver services and resources		9	2
	Reinforce Medicaid as payer of last resort		11	
	Build planning team knowledge of services and local providers so they can be communicated to the participant		9	2
Options Counseling: key takeaways from discussion				
<ul style="list-style-type: none"> Participants and caregivers shared that the scope of the case manager role is often unclear to them Performance of case managers has been inconsistent, and additional training on roles and options will be beneficial Subpanelists agreed that case managers weren't armed with accurate information about service options 				
Person Centered Service Planning (PCSP) Team Selection	Encourage and support the participant to identify the members of the PCSP team		8	3
	Set timely and convenient planning meeting location based upon participant directions		6	5
PCSP Team Selection: key takeaways from discussion				
<ul style="list-style-type: none"> Case managers make attempts to invite providers; however, some service providers are unwilling to participate in the team meeting because they are unable to "bill" for their time. Some providers are put on the plan simply because they are the only ones available. There are challenges to coordinating multiple attendees at the same time 				

V. Next Steps

- The subpanel will meet again on January 16, 2019 to:
 - Elect a CM advisory subpanel chair
 - Continue the case management leading practice exercise and discussion
 - Discuss service authorizations
 - Discuss case management training topics
 - Learn about a proposed case management help desk